

## **Soldiers' Home in Holyoke Board of Trustees Meeting**

A meeting of the Board of Trustees of the Soldiers' Home in Holyoke (HLY) was held telephonically on Tuesday, October 13, 2020. The meeting began at 5:10 PM.

- **Members Present:**  
Kevin Jourdain, Chairman; Cindy Lacoste, Isaac Mass, Carmen Ostrander, Sean Collins
  
- **Also Present:**  
Val Liptak, Acting Superintendent; Cheryl Poppe, Acting Secretary, DVS; Dr. Mohammad Dar, Medical Consultant; Dr. Thomas Higgins, Interim Medical Director; Norman Gousy, Chief Financial Officer, Pat Dill, Interim Nurse Executive; Mark Yankopoulos, Legal Counsel; Alda Rega, Assistant Secretary for Administration and Finance, EOHHS; Matt Deacon, Acting Legal Counsel, DVS; and Nancy Shimel, Recording Secretary
  
- **Pledge of Allegiance** - All present recited the Pledge of Allegiance.
  
- **Public Comment:**  
John Paradis requested to make public comment. Mr. Paradis is a member of the Soldiers' Home in Holyoke Coalition. The coalition continues to track the progress of the capital planning phase for the new Soldiers' Home. The coalition wishes to thank all who have participated in meeting with Payette, and for asking thoughtful questions and advocating for inclusion of private rooms with private bathrooms, an Adult Day Healthcare Program, and an enabling outdoor environment. All of our recommendations can be found at our website: [www.holyokesoldiershomecoalition.org](http://www.holyokesoldiershomecoalition.org). The coalition hopes to hear from administration regarding the UV disinfection system and the process to be put in place. Mr. Paradis noted that Xenex is the machine that is used in the New Hampshire veteran state home, as well as many VA medical centers and is known as a successful COVID deterrent.

Mr. Paradis wished to reiterate the coalition's opposition to any dissolution of the autonomy of the Board of Trustees. They are against any move by the Commonwealth to remove any Board members by county. The coalition believes there must be a member of the Board of Trustees for their respective county, as they fear that if this is removed, there will be a loss of the independent voice of the veteran interest. Mr. Paradis also noted that there are many veterans from Central Massachusetts, and the coalition supports the idea of having an additional Board member from Worcester County.

Mr. Paradis also stated that the coalition agrees strongly that the Board of Trustees be the body to hire and terminate the superintendent. We ask that the Board of Trustees allow a public vetting of the next Superintendent. Having committee involvement is the right thing to do to ensure we get the person with long term care credentials that has the right experience, right temperature and demonstrates the ability to collaborate with the veteran community. Much like the school districts, we think a community forum to meet final candidates would be a wonderful opportunity to see how the candidates react to our community concerns. We would also like to see a community advisory council formed, and that this person have a seat at the table of the Board of Trustees meetings, so that they are able to offer advice on what they are hearing from the veteran community. We hope this will be considered and that we are available to help the Board of Trustees develop the parameters of such an advisory council.

Lastly, Mr. Paradis noted that there are groups in the community asking for the names of veterans who passed under COVID-19 while under the care of the Soldiers' Home in Holyoke. They would like to memorialize and pay tribute to them. We want to ensure this is done with the consent of the families. Mr. Paradis inquired if there is a list that can be shared with the coalition, it can be emailed to them at [holyokesoldiershomecoalition@gmail.com](mailto:holyokesoldiershomecoalition@gmail.com).

**Public Comment (cont.):**

Kevin Jourdain stated that the Board will consider all of Mr. Paradis' points. Mr. Jourdain asked that a formal written request be submitted to the legal counsel at the Home for the provision of the veteran names, as we would need to get legal vetting from a HIPAA component, in addition to family consent.

- **Approval of Minutes**

Upon motion by Cindy Lacoste and seconded by Carmen Ostrander, it was unanimously VOTED to accept the unamended minutes of the Board of Trustees meetings held on September 8, 2020 and September 30, 2020. Kevin Jourdain conducted a Roll Call vote on the approval of the unamended minutes of the Board of Trustees meetings on September 8, 2020 and September 30, 2020. The Roll Call vote is as follows: Sean Collins (Yes), Cindy Lacoste (Yes), Isaac Mass (Yes), Carmen Ostrander (Yes), Kevin Jourdain (Yes).

- **CFO Update**

Norman Gousy reviewed the "Trustee Fund-Summary of Receipts and Disbursement Report for FY20 for the period ending September 30, 2020, as well as the current month's activity detail. He provided information on the operating budget using the standard reporting format. The UBS and Westfield Bank statements were also provided.

Alda Rego, Assistant Secretary for Administration and Finance at EOHHS, provided the following presentation: "Holyoke Soldiers' Home: Budget Overview". Copies of this presentation were provided to all Board members. This is being provided in response to questions that had arisen at the last Board of Trustees meeting on the budget process and the available state appropriation accounts. Secretary Rego provided information on the standard Commonwealth of Massachusetts annual budget cycle, budget appropriations and available revenues, and appropriated amounts vs. actual expenditures. She also reviewed the COVID Relief ISA data.

Kevin Jourdain inquired if we are able to carry over money from retained revenue accounts? Secretary Rego confirmed that all is carried over, whatever is in the retained revenue account at the end of the fiscal year is a balance going forward.

Kevin Jourdain noted that EOHHS is allocating a lot of funding into the Refresh project at the Home currently. He inquired how those Refresh funds appear in the FY20 budget and post-July into the FY21 supplement. Secretary Rego stated that the capital improvements in the Refresh project come through the Division of Capital Asset Management (DCAMM). DCAMM has committed money to the project and has allocated 2.7 million dollars across FY20 and FY21. The Soldiers' Home in Holyoke gets a transfer of funds into a separate capital appropriation that is funneled to the Home so the Finance team at the Home can pay incurred bills.

Kevin Jourdain inquired if we are still using any federal COVID money or is it all being derived from state appropriations and retained revenue accounts? Norm Gousy stated that we are still using the COVID ISA for furniture and fixtures for the Refresh project. Mr. Jourdain noted that he is referring to the COVID Relief ISA. Mr. Gousy confirmed, and that in FY20 we used part for the operating COVID expenses such as nursing staffing, and now we are using the COVID ISA for furniture, floors and fixtures that are being refreshed. Mr. Jourdain inquired if we had the COVID Relief ISA that was referred to in Secretary Rego's presentation worth 1.3 million dollars, as well as a separate ISA which we believe will be 2.7 million dollars that will pay for the Refresh project? Secretary Rego provided confirmation on this.

**CFO Report (cont.):**

Kevin Jourdain inquired if there is any additional money available under COVID, or if there is hazard pay differential, and if that is being paid out of retained revenue. Secretary Rego confirmed that we are operating under an interim 3 month budget, working on going forward during the pandemic. Either way, the Soldiers' Home in Holyoke is operating almost normally, with funding available to conduct all business as needed. Nothing is being held because we do not have a budget. She stated that the Home is operating under planning numbers and we should proceed with doing what we were doing in FY20. The Home is operating under FY20 budget and continuity of operations is critical. If we have a shortage, we would go back and get more funding from the COVID Relief ISA. Once we get the new budget, all of this will be reconciled.

Kevin Jourdain inquired if the staff at the Home is still getting hazard pay. Secretary Rego stated that they are not.

Isaac Mass inquired about the license plate retained revenue. It appears on page 5 of the budget overview handout that the total expenditures of the license plate revenue of \$850,000 are actually less than the operating revenue, which was unexpended. Since we can roll this over, why spend the license plate revenue rather than the operating funds? Does the Soldiers' Home in Chelsea need to spend their license plate revenue on PPE? If so, what percentage? Mr. Mass noted that he inquired on this previously and has not yet received an answer. Mr. Gousy stated that we did not spend out of the operating appropriation. The operating appropriation had money left in payroll, which we are not able to move. That was what was left in the operating appropriation. Mr. Mass inquired if we are not able to move funds between sub-line items? Secretary Rego stated that it cannot be moved across accounts, noting that it is very rare that any agency will spend down their appropriation. If the whole amount is not spent, it gets reverted back. There are contracts in line items for the full value of the contract. We spend the money that will expire first to ensure we have a good balance in the license plate fund. We don't have the ability to transfer without specific legislative authority, which is a rare statutory authority.

Mr. Mass inquired if we received an answer regarding the Chelsea license plate revenue account, and what they were required to spend down. Secretary Rego stated that the Homes spend their retained revenues as appropriately as possible – they are not required to spend it all down. Agencies spent money available to ensure that they responded to emergencies. She stated that she would follow-up on this item and provide this information to the Board. Mr. Mass stated that he had asked for this at last month's Board meeting as he wants to ensure that the Soldiers' Home in Holyoke is being treated as equitably as the Soldiers' Home in Chelsea.

Kevin Jourdain requested that the Board be given a breakdown for FY20 on exactly how the funds in the license plate retained revenue account and the 12-bed retained revenue account were spent. He also asked that the Board be shown why these funds could not be spent out of the general operating appropriation.

Secretary Poppe stated that she had looked at Chelsea's retained revenue account. She noted that there is flexibility on how homes spend their money. She stated that Chelsea did purchase PPE from other line items within the appropriation, including laundry. A lot was used for laundry services which could not have been used against the appropriation. This is why it is there – to help with other items that might be hard to have in regular appropriations. Secretary Poppe stated can get a breakdown on this, but that she did go back and look, both were reimbursed for their expenditures so they can continue to operate.

Kevin Jourdain inquired if the Homes were reimbursed for PPE, did those funds go back to the retained revenue account? Secretary Rego stated that she would follow-up on this. Mr. Jourdain stated that the Board of Trustees would like to be very judicious in the use of the retained revenue account, so ideally we would spend all the funds in the state appropriation, allowing us to build up the retained revenue account for something the Home could use. He noted that this could be a buffer for downturns in the state budget process. If there is money we can carryover legally, then these should be the last funds used, unless we can use state appropriation money.

**CFO Report (cont.):**

Cindy Lacoste inquired on the status of the \$100,000 reimbursement to the Trustee fund from the EMR project. Secretary Rego stated that this is funding that we are getting from the Executive Office of Health and Human Services, and that this will be reimbursed to the Trustee fund as soon as we get the funds for the capital project. The legislature passed a bond bill, and as soon as the funds are released, we will return the \$100,000 to the Trustee fund. Kevin inquired on the timeline that we will get these approvals? Secretary Rego confirmed that hopefully it will be within the next 30 days. She stated that she would connect with Norm Gousy on this to return these funds as soon as possible.

This concludes the CFO Report.

- **Report from the State and Administrator**

Secretary Poppe recognized the 242<sup>nd</sup> birthday of the U.S. Navy on 10/6/20. She also wished to thank all for their patience with the recent changes with family visitation, and noted that this is being done in the best interest of the Home and for the safety for the veterans and families.

Secretary Poppe provided an update on the Rapid Planning Phase for the Soldiers' Home in Holyoke. In partnership with the Division of Capital Asset Management and Maintenance, architectural study vendor Payette has completed its initial stakeholder engagements, which began on September 4<sup>th</sup>.

These stakeholder meeting include a mix of in-depth interviews and workshops with veteran residents of the Home, all family members and health care proxies, Holyoke Soldiers' Home employees, Massachusetts veterans' groups, Legislators, local and federal partners, the Board of Trustees, and more.

All stakeholders were encouraged to take the online survey and, to date, more than 350 people have provided input using the online survey.

These engagements play a vital role in determining the future needs of our veterans in Western MA, and we look forward to continuing our work alongside DCAMM and Payette.

Please continue to amplify the online survey to your respective constituents so we can ensure the most robust set of data can be obtained throughout this process.

As a reminder, a website has been created to provide ongoing updates on the capital project, which can be found at [mass.gov/HolyokeSHProject](https://mass.gov/HolyokeSHProject). There is also an email inbox to gather additional feedback, [HolyokeSHProject@mass.gov](mailto:HolyokeSHProject@mass.gov).

As far as next steps for the project, Payette and DCAMM continue their expedited needs assessment to determine the short- and long-term needs for our veterans in Western MA, which will help frame the Soldiers' Home in Holyoke as we are reimagining its future. This includes examining information gathered at the hundreds of surveys that have been submitted, stakeholder meetings, and data retrieved from private, local, state, and federal sources.

We are committed to an expedited timeline, and we will continue to be flexible and dynamic in doing this work. Thanks to the many people involved along this process, we are making real progress.

Thank you all for your time today. At this point, I'd like to turn it over to Val Liptak.

**Report from the State and Administrator (cont.):**

Val Liptak provided the following update:

**Current Veteran Census:**

- 89 veterans are at the home
- 19 veterans are in the dorm
- 2 dorm veterans LOA
- 24 veterans are currently at the dedicated skilled nursing unit at Holyoke Medical Center
- 2 veterans in an acute care setting
- 136 total across all settings

**Veteran Testing and COVID update:**

- Regular onsite surveillance testing continues to be conducted weekly on our negative veterans and staff. Residents' vital signs are closely monitored, and they are immediately retested if any suspicion for COVID.
- Residents are also tested as part of contact tracking if a visitor reports credible COVID exposure during the ten days prior to the visit. A Rapid swab and a routine swab are collected for validation.

**Status of Veteran test results at the Home:**

- 38 out of 43 Veterans were tested
  - 37 negative
  - 1 pending
- The five not tested are accounted for as follows:
  - 1 In-house in hospital
  - 1 In-house refused
  - 2 Dorms in Rehab
  - 1 Dorm LOA

**Current Employee Numbers:**

- 314 Total Employees
- 295 Active Employees
- 94% of our staff is currently reporting to work
- 19 employees are currently out of work (17 Direct Care and 2 Non-Direct Care)
  - 11 employees out on FMLA
  - 3 employees out due to an IA
  - 5 employees out for other reasons

**Status of Employee test results at the Home:**

- October 7 & 8th:
  - Total all staff tested 240
  - 239 negative
  - 1 invalid and being retested.
  - 178 employees tested out of 199 negative state employees.
  - 89% Compliance rate for the October monthly testing.
  - The 11% has nine additional screening sessions to meet 100% compliance.

**Report from the State and Administrator (cont.):****Testing Update:**

- On September 23, 2020, mandatory COVID-19 testing was implemented; employees who have not been tested or previously tested negative will be required to test.
- Baseline data has been collected on all negative staff.
- Each staff member will be tested monthly as required by policy, but the Home strongly encourages all employees to participate in weekly testing.
- The Abbott ID-NOW test machine and dedicated printer are now up and running and is being utilized where quick turn-around is needed for individual testing. All Abbott tests are validated with a simultaneous send-out test for quality control purposes.

**Facility Infection Control:**

- We are taking all precautions possible related to infection control and following all guidance and requirements from CMS, CDC, DPH, and Governor Baker's orders.
- Life sized PPE stand up models have been created demonstrating the appropriate PPE for each unit. Staff education is being done.
- We are evaluating a best offer from a vendor for an Entry level Kiosk Pilot Program to assist in detection of temperature and real time monitoring of screening questions.
- Fall and Winter Indoor Visitation began on October 6<sup>th</sup> in the Main lobby of the Home. In preparation for Indoor Visits, the old carpet was removed and replaced with new flooring, drapery removed. Plexiglass has been installed at the communication desk, and 2 air scrubbers have been placed in the area to ensure air exchange.

**Facility Infection Control (cont.):**

- Brief physical contact is allowed. In order to reduce the risk of transmission, individuals must; wear full PPE to include surgical mask, eye protection, gown and gloves,, use alcohol-based hand sanitizer, hug with faces in opposite directions, and limit the duration of close physical contact and avoid face to face contact even when face masks are used.
- This month the Veterans received their vaccination against the influenza virus.
- Soldiers' Home personnel will be receiving their vaccinated against influenza virus in October.

**Medical Updates:**

- On Tuesday, October 6, clinical monitoring identified COVID-like symptoms in two veteran residents and out of an abundance of caution, the veterans were proactively transferred to a hospital for evaluation and further monitoring. As of Friday, October 6, both have tested negative for COVID by rapid testing; one is confirmed negative by PCR and the other is pending. Per
- Infection control protocol, visitation for that unit was temporarily postponed, and staff on the unit were wearing full PPE, which includes an N95 mask, face shield, gown and gloves. We expect these restrictions to be lifted later today if the remaining confirmatory test is negative.
- One veteran was hospitalized for bilateral pneumonia (not COVID) and the other has returned to the facility with treatment for cystitis.
- The contract with Baystate Medical Practices for Infection Prevention and Infectious Disease consultation is being finalized. Dr. Higgins and Ms. Pehar remains in close contact with Baystate Infection Control, who have been very helpful with our questions regarding testing and management of any potential exposures to pathogens, including COVID-19.
- Dr. Higgins has sourced three palliative care experts to provide an evaluation of our hospice and palliative care program; an offer was tendered to the first-choice candidate on October 8<sup>th</sup>, and we are awaiting a response.

**Report from the State and Administrator (cont.):**

- The medical staff has launched a fracture reduction initiative where each Veteran will be evaluated for fracture risk with Vitamin D levels and where indicated Dual Energy X-ray Absorptiometry (DEXA) scanning for osteoporosis.
- At-risk veterans will be treated with medications and increased physical therapy to strengthen bones and reduce the risk of fractures.
- After an evaluation, the team's final decision was to purchase two Surfacide UVC units for ultraviolet disinfection. The purchase order is in process.
- The medical staff has completed calling their patient lists from the year prior to COVID-19 to make sure outpatient needs are addressed.
- The outpatient department will remain closed through the end of this calendar year.

**Clinical Staffing:**

- Since the last update, we have hired the following:
  - Director of Nursing started on October 6, 2020
  - The Occupational Health Nurse joined our team on September 28, 2020.
  - Nurse Practitioner – start date is November 9, 2020
- The Director of Social Services position was posted on September 23<sup>rd</sup>. Interviews will be set up next week.
- We continue to bring on new staff every month utilizing multiple agencies to assist in sourcing staffing.
- We are onboarding 7 Agency CNA's on 10/14.
- As our efforts continue, we need your assistance to get the word out that we need qualified and mission driven applicants to staff the Soldiers' Home.
- We have provided Infection Control Updates for Clinical staff this month. This included information on Standard and Transmission based precautions, cleaning and disinfecting of equipment, and antimicrobial stewardship. 174/183 clinical staff received this education for a compliance rate of 95%.

**Quality and Compliance:**

- Following our unannounced visit from the Joint Commission on July 21<sup>st</sup> and 22<sup>nd</sup>, the Plan of Correction was submitted to the Joint Commission on September 23, 2020.
- The Joint Commission accepted the plan of correction on September 30, 2020 and will return within 60 days unannounced to ensure the plan has been implemented.
- The Joint Commission report and plan of correction was sent to the Board of Trustees on 9/28/2020.

**Human Resources and Labor:**

- The completed permanent schedules were completed in August, the union requested revisions, the union/management agreement is to implement the set schedules on January 3, 2021.
- We continue to have monthly labor management meetings with the MNA and SEIU 888.
- Our Interim Nurse Clinical Consultant Team remains in place until December.
- We on boarded an interim Risk Manager and are awaiting 2 interim House Supervisors.
- We have completed EPRS's on non-clinical staff.
- We are completing EPRS's on all clinical staff and are 25.96% to date. Expected completion October 28, 2020.

**Report from the State and Administrator (cont.):****Facilities and Operations:**

- We remain at 6 units open.
- Refresh Project:
  - Phase I is complete.
  - The veterans were successfully moved from the second floor to the 3<sup>rd</sup> floor on September 30th.
  - Phase 2 of the Refresh project will begin on October 19<sup>th</sup>
  - The target date for completion is December 28, 2020.
- We continue to work with DCAMM and a vendor who is reviewing building and infection control quick hit improvements to assist in preparations for the potential COVID resurgence in the fall.
- Michael Lazo, COO continue to evaluate the operational needs of the maintenance, environmental care, and dietary departments.
- EVS and Dietary positions are currently being filled.
- Facilities positions filled since last update:
  - Informatics Coordinator – Start date was September 28th
  - Director of Facilities – the final candidate has been picked and the onboarding process has started.

**Systems and Operational Status:**

- Policy and procedure review continues as we prepare for our new software management system – Policy Tech.
- The Medical Leadership Team is working with UMass Medical School to align with Chelsea Soldiers Home and move from Medical Bylaws to policy and procedures.
- The Chelsea Soldiers' Home and the Holyoke Soldiers' Home continue to work together and are currently in the selection process phase for the EMR. Overall the engagement and support from across the organizations continues to be successful.

**Veteran, Family and Staff Support:**

- 8 staff Open Forums were held September 28<sup>th</sup> and 29<sup>th</sup>.
- Communications continue to be developed for families, the staff, and the unions.
- Grief Support Programs continue for staff to receive support in coping with grief, loss and, trauma during the COVID-19 pandemic.
- Family member support group meetings began on September 22 off-site with Jill Adams, MSW, LICSW.

This concludes the State and Administrator Update Report and opened the discussion up to any questions.

Kevin Jourdain noted that it was stated that 26% of EPRS' are completed for staff. He inquired when all staff will have at least one performance appraisal completed for staff who have worked for the facility for one year or are through their probationary period or longer? Val Liptak stated that all non-clinical EPRS' have been completed. Clinical staff EPRS completion is at 26%, much due to the fact that we revised 82 Form 30's throughout the agency, and we needed to negotiate these through the unions. The target completion date is by the end of October. We have also put in a tracking mechanism for employees in their probationary period. This will be monitored by the Staff Education department and brought forward to the Executive Team to ensure all new staff are getting probationary review check-ins during their first 9 months of employment.

Kevin Jourdain inquired if, once these EPRS' are completed, will performance improvement plans be implemented? Val confirmed this. There is a 6 month review and an annual review done during the period of July 1-June 30. We are behind due to the fact that we revised job descriptions. When employees had their EPRS, they also signed their job description. There will be a check-in every 6 months. An administrative support person is tracking this and sends out reports on where we stand on this. There is a process if there is a problem – we need to follow contract language for this.

**Report from the State and Administrator (cont.):**

Kevin Jourdain noted that Pat Dill stated we are looking for help to fill certain key positions. The Board would like to be sent a list of these vacancies and the quantities of these positions that are vacant. Mr. Jourdain inquired as to the assistance we are receiving from Human Resources and the State on marketing, advertising and recruiting to fill vacancies. Val Liptak stated that we have a bi-weekly graph on the staff we need and the vacancies we have. We also have a Talent and Acquisition team and a Human Resources team in Boston that we are working with to promote positions. We are moving in the right direction to have enough staff for 8 Units by December, including agency staff.

Kevin Jourdain inquired if anything is needed from the Board, and do you feel we are on the right trajectory for success? Val Liptak confirmed that she believes we are on an appropriate path for success, but there is an ebb and flow in the hiring process. With help from EOHHS and the Talent Acquisition team, we are in the right direction. We have a good team in place to bring on new staff. Ms. Liptak confirmed that she will provide the vacancy data to the Board, and that the support of the Board of Trustees is appreciated.

Kevin Jourdain asked how he can get additional information on the Surfacide UV machine, which Dr. Higgins stated they have decided to move forward with, rather than the Xenex machine. Dr. Higgins noted that they looked at 4 different units before deciding on the Surfacide. A spreadsheet was created providing the pros and cons of each unit. This can be sent to the Board. Dr. Higgins stated that the Surfacide unit stands approximately 5 feet tall. He noted that it is possible to use a single device in a small room, so it can be placed in a bathroom or elevator independently. In a large room, they can be placed throughout the room. Each unit has 3 emitters – units can be linked together or they can be separated. All single unit emitters would have to run at full capacity – that's one of the reasons we went with the Surfacide unit. The other advantage of the Surfacide is that it uses standard Phillips UV bulbs, so we would incur less ongoing expense.

Kevin Jourdain inquired if we had purchased 1 or 2 units? Dr. Higgins confirmed that 2 units were purchased.

Kevin Jourdain stated that one of the features to purchasing the Xenex machine was that federal money would pay for the unit. How was this unit funded? Michael Lazo stated that the state procured these units for us. It was approximately \$200,000 for the 2 units. Kevin requested confirmation that it was paid for with state appropriate money. Mr. Lazo stated that it was. Mr. Jourdain inquired if the warranty and maintenance was included in this price? Mr. Lazo confirmed that this expense included a service plan.

Sean Collins noted that he had reviewed the Joint Commission report and wished to recognize the work getting done at the Home. He inquired if the Abbott ID test machine is for asymptomatic individuals or anyone who needs a test? Dr. Higgins stated that the sensitivity of the Abbott ID test machine is not as good as the PCR testing, so we are reserving this for symptomatic individuals or when we need to know if an individual needs to be quarantined or isolated. He noted that we have to test judiciously, adding that a positive test from the Abbot ID machine can be counted on, but if a negative test, a second test is always done with the PCR. The resident is isolated until the PCR test results are back. Mr. Collins inquired if the validation testing will be indefinite? Dr. Higgins stated that we will continue to run simultaneous testing at this time, and will revisit this in 3-6 months' time.

Sean Collins inquired if the flu vaccine is mandatory for staff? Val Liptak stated that it is not mandatory, but it is encouraged. Mr. Collins inquired if there is a plan in place for employees not getting the vaccine? Ms. Liptak stated that if an employee does not get the vaccine, they would be required to wear a mask, which they are currently doing under our PPE guidelines. Mr. Collins discussed Governor Baker's stance the flu vaccine for school children. Kevin Jourdain inquired on our current flu vaccination rate. Ms. Liptak stated that the flu vaccine clinics will start tomorrow, and we will report out on the compliance rate at the next Board of Trustees meeting.

Secretary Poppe stated that the Department of Public Health (DPH) has put out an order that facilities have these tests, it is required, but we need to go through Human Resources before that is done. The Department of Public Health has put out a public service announcement to encourage people to get the flu shot. We are strongly encouraging staff to get this until we can ensure it is requirement.

**Report from State and Administrator (cont.):**

Sean Collins stated that he appreciates having received the Joint Commission report and the response to that report. He requested clarification on the timelines, as there are deadlines to put action items into place. He also noted that Dr. Higgins has addressed some of those items with the Medical Staff. He asked if the Board can get an update on if there is anything that the Board members can do to help facilitate your success. They are available to provide any assistance needed. Kevin Jourdain suggested adding “Joint Commission Update” as an agenda item for the next Board of Trustees meeting.

Kevin Jourdain inquired if we have an approved vendor in place for the electronic medical record. Sean Collins stated that he would like to have the names of the vendors we are considering. Val Liptak stated we are in the process of reviewing those vendors who applied to the RFR. Mr. Jourdain asked if an update on this can be provided at the next Board meeting.

Sean Collins inquired on the report given to the Board on “Direct Care Callouts – March and April 2020”, noting that it is difficult to get a fair assessment during that time frame due to COVID. He suggested gathering this information during an alternate timeframe. Kevin Jourdain asked if there is more updated information on this for time and attendance, such as August/September 2020. Val Liptak stated that this report was in response to the timeline that was specifically requested, looking at trending during this timeframe, and if it would have been better to have all full-time staff vs. part-time staff. Looking at the data, there wasn't a correlation and it was not good data. She stated that we do have more current data, but not sure that it would be of value given that we are still in transition mode at the Home. Ms. Liptak noted that the set schedule has a mix of full-time and part-time employees and once this system is in place we should see the correction, although she can gather this information if it requested.

Kevin inquired if we are still seeing a 12-14% callout rate? Ms. Liptak stated that we do still have a high percentage of sick time. Carmen Ostrander suggested going back to a timeframe previous to COVID, such as an August/September 2019 timeframe, to look at whether part-time employees were calling out more frequently. This could be used as a base to what we see going forward. Ms. Liptak noted that full-time staff do callout more frequently than part-time staff. She stated that are replacing more than 50% of the staff. Creating a system moving forward would be something worth looking at.

Isaac Mass expressed his thanks to the entire team. He appreciates the work on the items that the Board and the Soldiers' Home Coalition have brought forward. He specifically recognized having addressed the concern to have 100% of the employees have COVID testing. As we go into the fall months and look at a potential wave of COVID in the greater community, what are you doing to prepare for a possible sudden spike in employee callouts? He also inquired if we have a rapid emergency employment plan in place? Val Liptak stated that we are currently bringing in more staff in preparation for the residents currently residing at Holyoke Medical Center to return to the Soldiers' Home in December. We will have an uptick of 8 staff per shift. We are taking this opportunity to prepare if we have additional callouts. We are training these additional staff on utilization of the Policytech system and to do individual training in the computer lab. We have a whole program where we can train the additional staff if they are not needed, and implement them if they are needed. We are monitoring staffing levels daily and weekly and are prepared that we have the staff, utilizing both agency and pool staff. If we get to a point where we need additional staff, we would work with the Executive Office of Health and Human Services (EOHHS) to do whatever needs to be done to ensure adequate staffing. Mr. Mass stated that he would like to ensure that those lines of communication remain open so we can call on EOHHS if we have an emergency and they understand what the sudden spike is. Mr. Mass noted that it would be helpful to know what the tolerance level for staffing is going forward. Val Liptak stated that staffing levels are based on hours per patient day (HPPD), and 25% added into the staffing pattern for benefit coverage, as well as the additional 8 staff per shift overage built in. We would have to lose approximately 30-40% of staff and would have time to bring in additional clinical staff. She stated that she feels confident in what we are doing. Kevin Jourdain noted his appreciation for all the hard work being done.

**OLD BUSINESS:**Trustee Account Audit Update from Powers & Sullivan and the Chair:

Kevin Jourdain reported that there will be a final Trustee Account Audit report available shortly. It will be distributed prior to the next Board of Trustees meeting so that it can be on the agenda for discussion.

Meeting the Capital & Infrastructure Needs of the Soldiers' Home in Holyoke:

Kevin Jourdain reported that the Board of Trustees had their stakeholder meeting with Payette. He thanked all who have given their input and completed the survey. There has been a substantial amount of feedback offered on the capital needs for the Home going forward. This will continue to move forward on an expedited pace.

Follow-Up on Board Rules adopted on July 14 relative to recommendations from Attorney Pearlstein Report:

Kevin Jourdain reported that most of the recommendations from Attorney Pearlstein's report were addressed earlier in the meeting. He did inquire if there is any update from administration on the recommendation about medical orders and any potential staff involvement in "Do Not Resuscitate (DNR)" orders? Val Liptak stated that this is a discussion that has to happen with the physicians, so there is a place for that conversation. We are working with the social work team to ensure this involvement happens regarding this. Dr. Higgins reported that the social work team has reviewed the Medical Orders for Life Sustaining Treatment (MOLST) with all of our veterans at this point. From a medical healthcare standpoint and as a physician, Dr. Higgins reported that he has had many end of life conversations, and the way this Motion is written would be problematic. He noted that the physicians and nurse practitioners are state employees, and that in the past, he has been asked many times by family members, "What would you do if this was your parent?". The physicians and nurse practitioners should be able to have open and honest discussions on this. Kevin Jourdain stated that he just wants to ensure we are honoring people's wishes. Isaac Mass stated that his primary concern is what was written in Attorney Pearlstein's report stating that people were being called and asked to make changes around "do not hospitalize" and their medical directives in general. Mr. Mass added that the physicians and nurse practitioners are not required to give an opinion on what they would do in this circumstance, and it only matters what the resident or Health Care Proxy would do as they are the decision makers. Mr. Mass stated that he would like to see an ethics opinion on this issue, as family member circumstances would never be the same. There are different beliefs across cultures, and for the physician or nurse practitioner to impose their preferences imposes ethical issues. Mr. Mass stated it would be helpful to have an outside discussion on what the constraints would be, as the core is to make sure that staff is not proactively asking for directives to be changed for the convenience of the facility. Dr. Dar expressed that the point made is the bridge that we are all speaking toward, noting that the current language precludes conversations from happening at all. The intent in the Pearlstein report is that those conversations can occur, but there should be no pre-determined bias or viewpoint on how that conversation should land. The resident's health care proxy should be in the driver's seat. Dr. Dar stated that if the Board would want to talk about change to the language, he would be happy to do so, but the point that Dr. Higgins made about wanting to honor that intent, which the Home has done, is a systemic process to reach out to each family so they could ask questions. I feel that we are all aligned in the right intent, but the current language is not quite matching up to the intent everyone wants. Dr. Higgins proposed that a policy and procedure be written that would eliminate the need for this Motion. He stated that he had former experience on the Ethics Committee at Baystate Medical Center, and he is aware of these problems and discussions. He believes we are all on the same page to not make a rash decision, but feels that the way the Motion is written could be problematic. Kevin Jourdain stated that all seem to be on the same page as far as the end goal. We are focused on what the Pearlstein report revealed and are also sensitive that it is patient driven and that they are the ones who are initiating this interaction. As health care professionals, you can give your sincerely held opinion, but be aware of who is in the driver's seat, and asking was this initiated for our convenience or because patients are asking questions and trying to get answers to difficult questions. I believe we are all aligned in the end result – just question on process over substance. We are open to recommendations from our medical leadership on this.

Discussion of Recommendation of Soldiers' Home in Holyoke Legal Counsel to review past Executive Session Minutes for Possible Release: No new updates on this item per Mark Yankopoulos.

**OLD BUSINESS (cont.):**

Board Discussion, Recommendations and Motions Relative to Proposed Changes to Statutes Related to the Board of Trustees: Kevin Jourdain noted that this item had been tabled while changes were discussed through the Governor's office. He expressed thanks for the sincere conversation, and after this conversation the Board feels comfortable to move forward with the proposed report out to all involved. Copies of this report were provided to all members of the Board. Maintaining the Board's authority and recommendations that were made to change the statute to reduce the authority of this Board and change the composition of the Board. Mr. Jourdain stated that he thinks that the Board's opinions are weighed carefully on what we think we should embrace for changes and what we should not. We should strike a good balance to keep veteran composition on the Board of Trustees strong – keep our county leadership representation on this Board. The power of the Board of Trustees 1952 statute should be maintained. All of those elements are addressed in the Motion. We certainly encourage the Board of Trustees to support this position, and welcome some of the changes recommended, such as having medical professional on the Board of Trustees. We also support some of the other changes that the Governor mentioned regarding having the presence of the Executive Office of Human Services (EOHHS) and the Department of Veterans Services (DVS) on the Board. We recommend this be as a non-voting member. EOHHS representation and the Secretary of DVS come to all of our Board meetings, but we feel that they have sufficient oversight and authority as is, and do not need two voting members. Mr. Jourdain noted that their involvement is key to what we do. The Board recommends striking a balance, keeping us as an authoritative Board, not an advisory Board, and embracing the changes from Attorney Pearlstein report. We are open for Motions and follow-up discussion.

Cindy Lacoste made a motion, seconded by Isaac Mass, to approve the August 11<sup>th</sup> Motion as stated. All were in favor of adopting this motion. The Roll Call Vote is as follows: Sean Collins (Yes), Cindy Lacoste (Yes), Isaac Mass (Yes), Carmen Ostrander (Yes), Kevin Jourdain (Yes). Kevin Jourdain stated this will be forwarded as recommended and sent to the appropriate legislative bodies and Executive department. He expressed his thanks to the Soldiers' Home Coalition, the VFW and others who have weighed in on preserving the authority of the Board of Trustees.

**NEW BUSINESS:**

Receipt and Acceptance of the Resignation of Bennett Walsh as Superintendent of the Soldiers' Home in Holyoke: Cindy Lacoste made a motion, seconded by Isaac Mass for the receipt and acceptance of Bennett Walsh as Superintendent of the Soldiers' Home in Holyoke. All were in favor to approve this. The Roll Call Vote is as follows: Sean Collins (Yes), Cindy Lacoste (Yes), Isaac Mass (Yes), Carmen Ostrander (Yes), Kevin Jourdain (Yes).

**Judicial Decision of Judge Ferrera in the matter of Walsh v EOHHS and Holyoke Soldiers' Home BOT:**

Kevin Jourdain stated that the purpose for putting this on today's agenda is that it is noticeable by abstention in official proceedings of this Board of Trustees. Mr. Jourdain noted that Judge Ferrara did a fine job analyzing the material issues in this matter and the result that speaks to the reading of the statute. We now have the guidance to move forward as to where certain authorities lie, being mindful of Judge Ferrara's words. We now can initiate the selection process of the new Superintendent. Discussion followed on what the process should be. The Board of Trustees will appoint the new Superintendent, and we want to do this in the right way, and people can feel comfortable that the decision will rest with the Board of Trustees. Mr. Jourdain relayed that we are fortunate to currently have the leadership of Val Liptak, but she is the administrator at Western MA Hospital, so we do not want to overextend her services at the Home, and need to move forward with hiring a new Superintendent. We will need to have someone that all are comfortable with. We have an Executive Session process for the initial rounds of candidates that will not be released. As we get to the final candidates, there is the potential to have public exposure of these candidates as we screen through how to have disclosure of the finalists. Will determine how to get input from different constituents and who should be the final candidate. Mr. Jourdain noted that some names have already presented themselves. We will start considering the process in today's Executive Session. Mr. Jourdain noted that the Board is sensitive to the recommendations made in the Pearlstein report regarding qualifications and the needs of the Soldiers' Home at this time under this level of change. Val Liptak had mentioned that there was a 50% turnover rate in staff, a new management structure and the capital planning project with major capital improvements up to and including a new Soldiers' Home. Not only do these things present challenges, but amazing opportunities.

**NEW BUSINESS (cont.):**

Appointment of Treasurer and Assistant Treasurer pursuant to MGL c 6 Sec 71. Discussion of any vacancies to these positions and possible appointments of acting persons: Kevin Jourdain recognized Isaac Mass for putting this item on the agenda. Mr. Jourdain reported that the Superintendent is supposed to appoint the Treasurer and Assistant Treasurer. We need to discuss if the Treasurer is currently doing the work of what the Treasurer is supposed to do. We need to speak to what the statute says we are supposed to be doing. We are asking state leadership to look at the job descriptions of the Treasurer and Assistant Treasurer, and are we conforming to that. As we think about who is in those positions now, and a potential new Superintendent, will appointments be forthcoming? This is an item that we are tracking and keeping in the periphery at this point. Isaac Mass noted that we have a position of Chief Financial Officer (CFO) who was appointed without the approval of the Board of Trustees. The statute says that should be appointed by the Superintendent. The legislation intended for us to approve someone who is a backup accountant and not the CFO of the institution. Mr. Mass stated that what should be happening is that we should adopt a policy that the CFO shall be the Treasurer and restructure for the Assistant Treasurer of the Home. We do not currently have this position in the Home. He noted that we cannot take any actions without the Superintendent. Kevin Jourdain noted that this is an item for future discussion.

Open Meeting Law Training Lead by Legal Counsel, Matt Deacon: Matt Deacon provided the following materials to the members of the Board: "Open Meeting Law Guide and Education Materials by the Office of the Attorney General" and the PowerPoint presentation, "Open Meeting Law: Balancing Government Transparency with Government Efficiency". Mr. Deacon provided a detailed training discussion on the Open Meeting Law. To confirm the receipt of the above mentioned educational materials, Mr. Deacon requested that all Board members sign the "Certificate of Receipt of Open Meeting Law Materials" and return to Mark Yankopoulos. Kevin Jourdain inquired on the reason for this certificate. Mr. Deacon stated that the statute requires that the Trustees sign to confirm they have reviewed the Open Meeting Law materials and that if applicable, reviewed a copy of each Open Meeting determination issued by the Attorney General within the last five (5) year to the public body of which they are a member of and in which the Attorney General found a violation of the Open Meeting Law. Mr. Deacon reported that there had been no violations of the Open Meeting Law for the Board of Trustees of the Soldiers' Home in Holyoke for the last five (5) years. Mr. Jourdain stated he was aware of one violation in July 2015. Mr. Deacon noted that was beyond the five (5) year period of the search performed. Mr. Deacon and/or Mark Yankopoulos are available for any questions that the Board may have around the Open Meeting Law to ensure conformance.

**Adjourn:**

Cindy Lacoste made a motion, seconded by Sean Collins to conclude the Public Session and move into Executive Session for the purpose stated on the agenda. Mr. Jourdain noted for the public's awareness that the Board of Trustees will not be returning from Executive Session to Public Session. The Board of Trustees will adjourn after the Executive Session has ended.

Roll Call Vote is as follows: Sean Collins (Yes), Cindy Lacoste (Yes), Isaac Mass (Yes), Carmen Ostrander (Yes), Kevin Jourdain (Yes). It was unanimously VOTED to conclude Public Session and move into Executive Session at 7:45 pm.

Respectfully submitted,

Nancy Shimel  
Acting Secretary for the Board of Trustees